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#### **Background:**

Electronic Benefit Transfer (EBT) is an electronic system that allows a recipient to authorize the transfer of their CalFresh benefits to pay for groceries and non-alcoholic beverages. The EBT card can be used at retailers who accept EBT cards. CalFresh benefits are deposited monthly into the EBT account of eligible CalFresh recipients. Specific steps must be followed when issuing/replacing EBT cards. This section describes the EBT process necessary to issue or replace both EBT cards and benefits.

#### Policy:

#### 63-402.1 Responsibilities:

Authorize CalFresh benefits to eligible customers. Ensure that an EBT account has been established through the CalWIN/EPPIC interface. Issue or replace EBT cards and benefits to CalFresh recipients as required.

#### 63-402.2 Benefit Availability:

CalFresh benefits will be deposited to the EBT account of eligible CalFresh cases each month based on the last number of the case. See <u>Definitions and Examples</u> for the table that shows the date of month that the benefits will be deposited into the customer's EBT account.

#### 63-402.3 Primary/Alternate Cardholder and Authorized Representative:

#### A. Primary Cardholder

Every active CalFresh case must have a "Primary Cardholder" in CalWIN.

#### **B.** Alternate Cardholder

The head of household can designate a member of the household as an Alternate EBT cardholder, in addition to the Primary Cardholder.

The CSF 64 /TEMP 2201 must be completed by both the Primary Cardholder and Alternate cardholder.

Issue an EBT card to the Alternate Cardholder upon the request of the primary cardholder. Both the Primary Cardholder and Alternate Cardholder can be issued EBT cards.

The Alternate cardholder must provide identification before an EBT card is issued.

The EBT card will allow the Alternate cardholder to access all of the household's CalFresh benefits. Any EBT account funds spent by the Alternate cardholder will not be replaced.

#### C. Authorized Representative

The Primary Cardholder may designate an Authorized Representative by completing form CSF 64/TEMP 2201.

Before generating an EBT card, the AR must provide identification. The EBT card will allow the AR to access all of the customer's CalFresh benefits. Any EBT account funds spent by the AR will not be replaced.

#### 63-402.4 Card/PIN Issuance and Replacement Procedures:

#### A. Initial Card Issuance

Issue an EBT card to the Primary Cardholder at the Intake Interview.

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#### B. Issuance by mail

The Primary Cardholder can request that the EBT card be issued by mail. Verify identification of the primary cardholder before mailing out the EBT card. An EBT card can be mailed to an Alternate Cardholder or Authorized Representative if designated in writing, either through the CF 285 at Application/ Recertification or with CSF 64/TEMP 2201.

#### C. Lost/Stolen Cards

EBT Cardholders are to report lost/stolen cards to the EBT Customer Service Desk (1-877-328-9677) and have the card deactivated. This will prevent anyone from accessing the benefits. Once a card has been deactivated, a new card must be issued. The recipient will be instructed by Customer Service to call the County if they wish to pick up the new card at an office. The primary cardholder/AR may come into a Family Resource Center (FRC) to receive a replacement card and select a new PIN, if necessary.

It is important that the primary person/AR understands the need to report a lost or stolen card to the EBT Customer Service Desk immediately. Any funds spent prior to a card being reported to the EBT Customer Service Desk will not be replaced.

#### D. Damaged Cards

Primary cardholders/ARs who report that their card is damaged or not functioning properly are not to call the EBT Customer Service Desk. Since they have the card in their possession, their benefits are not at risk. The Primary cardholder/AR may contact ACCESS to have a new card mailed or come in to any Family Resource Center (FRC) to pick up a replacement card.

#### E. Forgotten or Compromised PINS

If the primary cardholder/AR forgets his/her PIN or believes that someone else knows their PIN, they will be instructed to call the EBT Customer Service Desk to change their PIN by following the menu prompts. The cardholder must validate their Social Security Number (SSN) to be able to change their PIN over the phone. If the cardholder does not have a SSN, they may contact the EBT Customer Service Desk to request that their EBT card be deactivated until they can go to the nearest FRC to obtain a new card and set up a new PIN. The primary person/AR may come in to any FRC and select a new PIN.

**Note:** Document in case comments anytime an EBT cardholder requests that a card/PIN be issued or replaced. When a new card is issued, the old card is automatically deactivated.

#### 63-402.5 PIN Selection for Homebound Recipients:

In situations where a homebound recipient does not have an AR, an EBT card can be mailed to them. These recipients can use the EBT Customer Service number to select their PIN or they can request that the PIN be mailed to them.

#### 63-402.6 CalFresh Expedited Services & Hunger Prevention Act:

When a customer meets the criteria for CalFresh Expedited Services and these benefits cannot be issued through the batch process timely, authorize the benefits with an issuance method of "Transfer Online" process to ensure that Expedited Service is met. This allows the customer to use their CalFresh benefits immediately.

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#### 63-402.7 CalFresh Overpayment/Authorized in Error:

If a CalFresh overpayment was authorized in CalWIN but was not issued to the EBT card (Pending Status), the issuance can be canceled on the Status tab of the Maintain Issuance Detail window by the Immediate Need OA. As long as the customer is not aware of the erroneous benefits, the full amount of benefits authorized in error can be canceled. After the benefits have been canceled, CalWIN can be corrected by authorizing the correct benefits. If the customer is aware of the erroneous benefits, they cannot be canceled. They must be issued and an overissuance must be created, if necessary.

#### 63-402.8 Unused EBT Benefits:

Once benefits have been transferred to an account, they remain in that account for up to 365 days. If a household does not use the benefits, the account becomes:

- "Inactive" after 135 days,
- "Dormant" after 180 days and
- "Expunged" after 365 days.

#### A. Inactive Accounts

When a household does not use its CalFresh benefits for 135 days, the account becomes inactive. CalWIN will automatically generate a TEMP NA 1232 to notify the customer that the account has had no activity for over 135 days. Customers must use the benefits before 180 days or the account will go dormant.

The benefits are still available and the household will be able to use the benefits in the account. The EBT account will need to be re-activated if it is in closed status. Refer to <a href="Processing Guide">Processing Guide</a> for instructions on how to re-activate the account.

#### **B. Dormant Accounts**

When a household does not use its CalFresh benefits for 180 days, the account becomes dormant. The benefits are in the account but the household will not be able to use the benefits. Customers will need to have their EBT account re-activated.

CalWIN automatically generates a TEMP NA 1232 to notify the customer that their CalFresh account has had no activity for over 180 days. CalFresh benefits have been suspended and customer will not be able to access the benefits. Refer to Processing Guide on how to re-activate EBT account.

Complete form 16-104 HHSA to re-activate a dormant account on a case that is no longer active. Refer the request to a supervisor for review and approval.

Complete form 16-102 HHSA to pay an outstanding overissuance balance from a dormant account. Send Notice of Action NA 1240 to the customer.

#### C. Expunged Accounts

When a household does not use its CalFresh benefits for 365 consecutive days and there is no activity, the benefits become "expunged."

Expunged means the benefits are returned to the State.

Expunged benefits:

Cannot be restored

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- Are not available to the customer.
- Can be applied to any current active or open overissuance claim prior to becoming expunged.
- Are expunged on a staggered basis. For example, the account has not been used since September 2013 and benefits have been added to the account every month since September. Once September's benefits have been in the account for 365 days, they will be expunged. The benefits that were added later remain in the account. October's benefits will be expunged when they have been in the account for 365 days, and so on.

#### 63-402.9 Replacing Stolen EBT CalFresh Benefits:

Only benefits that were removed from the EBT account after the primary person/AR has reported their card lost/stolen to the EBT Customer Service Desk toll free number (1-877-328-9677) can be replaced. Because the Customer Service phone number is accessible 24 hours a day, 7 days a week, the possibility of benefits being removed after the card is deactivated is **very remote**.

Unless there is a clear indication that a POS transaction did occur with the old EBT card and PIN after the card was deactivated or that EBT Customer Service did not deactivate the card timely, the client's request for replacement of CalFresh benefits will be denied. If appropriate, Appeals will instruct replacement of the benefits.

#### 63-402.10 Specialized Living Situations:

#### A. Residents of Group Living Arrangements

To be eligible for CalFresh benefits, a resident of a group living arrangement (GLA) must be blind or disabled and receiving SSA Title II, Retirement, Survivors or Disability Insurance benefits.

Residents of a GLA can apply and be certified through:

- an Authorized Representative (AR) who is employed and designated by the GLA, or
- be certified on their own behalf, or
- an Authorized Representative of their choosing.

The GLA will determine if the resident may apply on their own behalf based on the resident's physical and mental ability to handle their own affairs. Accept all applications for any individual applying as a one-person household or for any group of residents applying as a household.

Those certified on their own behalf will be issued a card and allowed to select their own PIN. Those certified through an AR will have a card issued to the AR. The customer may or may not need a card issued to them. The decision on who will be issued an EBT card will be based on the CalFresh application and household composition.

#### **B. Licensed/Certified Alcohol and Drug Treatment Facilities**

Residents of licensed/certified alcohol and drug facilities must be CalFresh certified through the facility's authorized representative (AR). The AR will be issued an EBT card and is the only person who can access the CalFresh benefits while the client is a resident of the facility. The recipient must be identified, as the primary cardholder even though they will not be issued a card. The facility should not access more than one-half of the resident's monthly allotment before the 16th of the month. If a

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resident leaves the facility before the 16th of the month, they are entitled to one-half of their monthly allotment. These benefits should still be in the EBT account when the customer leaves the facility.

When a resident leaves the facility, the AR must contact the EBT Customer Service Desk and have their card deactivated. Failure by a facility to comply may result in disqualification to participate in the CalFresh program. The customer will need to get a new EBT card issued in their name. Refer to 63-123 for additional information.

#### C. Alcohol and Drug Treatment Facilities Authorized by FNS as a CalFresh Retailer

Residents of Alcohol and Drug Treatment Facilities that are authorized by the Food and Nutrition Services (FNS) as a retailer must be CalFresh certified through the facility's AR. Only the AR will be issued an EBT card and have access to the CalFresh benefits. The recipient must be identified, as the primary cardholder even though they will not be issued a card.

These facilities will be authorized by FNS to have an EBT Point of Service (POS) device to access and transfer EBT funds to their own bank account. The facility should not access more than one-half of the resident's monthly allotment before the 16th of the month. If a resident leaves the facility before the 16th of the month, they are entitled to one-half of their monthly allotment. These benefits should still be in the EBT account when the customer leaves the facility.

When the resident leaves the facility, the AR must contact the EBT Customer Service Desk and have their card deactivated. Failure by a facility to comply may result in disqualification to participate in the CalFresh program. The customer will need have an EBT card issued in their name. Refer to 63-123 for additional information.

### D. Battered Women and Children Shelters, Homeless Meal Providers and Congregate Elderly Meal Sites

Residents of these facilities will be issued cards for their own CalFresh case. If they want to contribute EBT CalFresh funds for the cost of meals, an EBT manual voucher can be processed by the shelter or meal site. Vouchers are obtained from the EBT Merchant Services after the facility is authorized by FNS as a retailer. Employees of homeless shelters cannot be ARs. Refer to 63-123 for additional information.

#### 63-401.11 CalFresh Repayment Process:

Customers may repay an overissuance by having the amount deducted from their current EBT account balance. Refer to Processing Guide

#### 63-402.12 Returned EBT Cards:

If a customer wants to return their EBT card when the case discontinues or closes, encourage the customer to keep the card in case they reapply.

#### 63-402.13 Fraud Reporting:

#### A. Suspected Recipient Fraud

Attempt to resolve conflicting or inconsistent information with the customer when you receive information of suspected fraud. Resolve any questionable information. Document all responses from the customer in case comments. If unable to resolve the suspected fraud allegations, initiate a fraud referral.

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The following are examples of allegations that may require a fraud referral:

- Benefits have not been accessed in 60 days or more; or
- Recipients are selling their CalFresh benefits (trafficking) or
- The recipient has asked for five replacement cards in a 12 month period.

Initiate the fraud referral to PAFD using the Fraud Referral and Tracking System (FRATS) when conflicting or inconsistent information cannot be resolved or you are unable to locate the recipient.

Follow regular FRATS referral procedures when making fraud referrals.

#### **B. Excessive Card Replacement**

CalWIN will send a warning letter to any EBT cardholder who has requested at least four card replacements in a 12 month period. The warning letter is designed to inform the recipient that the household's EBT card replacement rate suggests that they may be having trouble with their card(s) or indicates potential misuse. The letter will include information regarding the proper use of the EBT card and the penalties for trafficking.

A copy of each recipient warning letter will be sent to the County to be retained (imaged) in the recipient's file. If a warning letter is returned as undeliverable, the undeliverable mail will be forwarded to the County for follow-up. Refer the case for Full Field investigation if the recipient requests a fifth replacement card (in a 12 month period) and there is reason to believe the customer may be trafficking.

#### C. Suspected Retailer Fraud

When you receive information or suspect CalFresh trafficking/fraudulent activity on the part of a retailer, notify the Welfare Fraud Hotline at 800-421-2252. A FRATS referral will not be made.

#### 63-402.14 Replacing Benefits that have been Destroyed in Disaster/Misfortune:

Replace CalFresh benefits for recipients whose food is destroyed, spoiled or damaged during a disaster or a "household misfortune" such as a fire, flood, power outage, etc. The food that is being replaced must have been purchased with CalFresh benefits. The recipient may receive up to the maximum of one month's CalFresh allotment in replacement benefits. Refer to Processing Guide

#### A. Required Application

To request replacement benefits, customer may report a loss in writing, over the phone or in person. Customers must:

- Apply for replacement benefits within 10 days of the loss of food.
- Complete and sign form DFA 303 and the affidavit of loss 09-93 HHSA in order to apply for replacement benefits. The DFA 303 and 09-93 may be mailed to the customer if they are reporting over the phone or in writing.
- Return the DFA 303 and the affidavit of loss 09-93 within 10 days from reporting the loss.
- Submit DFA 303 and affidavit of loss 09-93 in person at any Family Resource Center (FRC) or Local Assistant Center (LAC) in case of a declared disaster.

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The application and affidavit may be mailed back to the FRC if the customer is unable to come to come to the FRC because of age, disability, or they live a considerable distance from any office and are unable to appoint an authorized representative (AR).

Document in case comments the reason the applicant cannot submit the application in person The replacement will be denied if the household does not return or submit the form within ten (10) days from the date that they call to report the loss.

The FRC will accept only original (not photocopied) applications and affidavits.

- If the 10<sup>th</sup> day falls on the weekend or holiday, the application can be considered timely if received the day following the weekend or holiday.
- If an application is submitted after the 10<sup>th</sup> day, inform the applicant verbally that the County is no longer taking applications.
- Applicants cannot claim good cause for untimely requests of replacement of food purchased with CalFresh.

The application for replacement benefits will be processed within 10 days after the report of loss.

#### B. Verification

Verify that a household misfortune/disaster occurred by either a collateral contact, documentation from San Diego Gas and Electric (SDG&E), the Fire Department or Red Cross, or a home visit. Document the verification in case comments. Accept the client's statement (09-93) unless the amount reported as being lost is questionable.

#### C. Required Notice of Action

The household shall be notified in writing of the replacement approval or denial with manual notice of action <u>09-90 HHSA</u>, <u>(09-90 HHSA Spanish)</u>.

The <u>09-90 HHSA</u> shall inform the household of its right to a state hearing to contest the denial or delay of a replacement. Replacements will not be made while the denial is being appealed.

#### Procedure:

Refer to the following: Processing Guide # 402-01 Definition and Examples

#### References:

ACL No 14-90 MPP 63-402.6 MPP 63-900 MPP 63-603

#### **Sunset Date:**

This policy will be reviewed for continuance by 5/27/2018

#### Release Date:

5/27/15